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| FOR INSTRUCTIONS, SEE BACK OF FORM CHECK ONE: This is an initial* Statement of Organization | pm 5.27 | FORM DR-1 (Rev. 04/2008) | STATEMENT OF ORGANIZATION |
| ☐ This is an amended* Statement of Organization *An initial Statement of Organization must be filed within 10 days of to making expenditures, or incurring indebtedness exceeding \$750. An a change. Penalties may be imposed for late-filed Statements of Organization | he committee's accepting contributions, and an interest be filed within 30 days of tanization. A candidate with an open | For Office Use Comm. # Indexed | |
| committee that exceeds \$750 in activity for another office shall file wi DR-1 disclosing information concerning the campaign for the new offi | thin 10 days either a new or amended | Audited Computer | + WRS |
| COMMITTEE NAME ↓ ↓ (A candidate's committee must inclu Committee to Elect Tom Shaw | | he committee.) | |
| IMPORTANT: Indicate type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retention Candidat (5) County Candidate (6) City Candidate (7) School Board or (10) School Board or Other Political Subdivision PAC (11) Loc | te (2)Statewide PAC (3)State Party (4)Other Political Subdivision Candidate (8) | County DAC / Q) | CHy DAC |
| COMMITTEE TREASURER (mandatory for all committees) | COMMITTEE CHAIR (mandat | orv except for a | candidate's committee) |
| Name Diana Shaw | Name Michael Diischer | | |
| Mailing Address 341 S 1st St | Mailing Address ↓511 W Elm | <u> </u> | |
| City State A Zip Code 50554 | City State Pocaniontas IAZip Code 505 | 74 | |
| Phone (712) 841-4296 | Phone (712) 335-4763 | | |
| e-Mail dshaw01@laurens-ia.com | michael_diischer@ms | | |
| INDICATE PURPOSE OF COMMITTEE - Check One Box Comment or description: | Advocate for/against candidate(s) Adv | | |
| All Candidates Enter: Office Sought: State Representative | County/Local Candidates and | ocate against bal d Local Ballot Co | |
| Political Party (if applicable) Independent | County:(If active in multiple ballot issue | elections attach | liet of counties |
| District: 8 | | ocolorio, allacri | not of countres |
| | Date of Election: | | |
| Year Standing for Election: 2010 | Date of Election: | | |
| Year Standing for Election: 2010 Bank Account Name (must match committee name) | Candidate name & Address or Par ↓ ↓ Aff | | |
| Year Standing for Election: 2010 Bank Account Name (must match committee name) | Candidate name & Address or Par | ent Entity (PACs | |
| Year Standing for Election: 2010 Bank Account Name (must match committee name) ↓ ↓ Committee to Elect Tom Shaw Name of Financial Institution/type of Account ↓ ↓ Laurens State Bank | Candidate name & Address or Par ↓ ↓ Aff Tom Shaw | ent Entity (PACs | |
| Year Standing for Election: 2010 Bank Account Name (must match committee name) ↓ ↓ Committee to Elect Tom Shaw Name of Financial Institution/type of Account ↓ ↓ | Candidate name & Address or Par ↓ ↓ Aff Tom Shaw Mailing Address ↓ ↓ 341 S 1st St City ↓ ↓ \$ | ent Entity (PAC: | Zip ↓ ↓ |
| Year Standing for Election: 2010 Bank Account Name (must match committee name) ↓ ↓ Committee to Elect Tom Shaw Name of Financial Institution/type of Account ↓ ↓ Laurens State Bank Mailing Address ↓ ↓ 102 S 3rd St, PO Box 136 City ↓ ↓ State ↓ ↓ Zip ↓ ↓ | Candidate name & Address or Par ↓ ↓ Aff Tom Shaw Mailing Address ↓ ↓ 341 S 1st St City ↓ ↓ S Laurens | ent Entity (PAC: illate, or Sponso | |
| Year Standing for Election: 2010 Bank Account Name (must match committee name) ↓ ↓ Committee to Elect Tom Shaw Name of Financial Institution/type of Account ↓ ↓ Laurens State Bank Mailing Address ↓ ↓ 102 S 3rd St, PO Box 136 | Candidate name & Address or Par ↓ ↓ Aff Tom Shaw Mailing Address ↓ ↓ 341 S 1st St City ↓ ↓ \$ | ent Entity (PACs Iliate, or Sponso State ↓ ↓ IA | Zip ↓ ↓ |
| Year Standing for Election: 2010 Bank Account Name (must match committee name) ↓ ↓ Committee to Elect Tom Shaw Name of Financial Institution/type of Account ↓ ↓ Laurens State Bank Mailing Address ↓ ↓ 102 S 3rd St, PO Box 136 City ↓ ↓ State ↓ ↓ Zip ↓ ↓ | Candidate name & Address or Par \$\frac{1}{\pmu}\$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | ent Entity (PACs Iliate, or Sponso State ↓ ↓ IA | Zip ↓ ↓ |
| Year Standing for Election: 2010 Bank Account Name (must match committee name) ↓ ↓ Committee to Elect Tom Shaw Name of Financial Institution/type of Account ↓ ↓ Laurens State Bank Mailing Address ↓ ↓ 102 S 3rd St, PO Box 136 City ↓ ↓ State ↓ ↓ Zip ↓ ↓ Laurens IA 50554 | Candidate name & Address or Par Tom Shaw Mailing Address | ent Entity (PACsiliate, or Sponso | Zip ↓ ↓ 50554 |
| Year Standing for Election: 2010 Bank Account Name (must match committee name) ↓ ↓ Committee to Elect Tom Shaw Name of Financial Institution/type of Account ↓ ↓ Laurens State Bank Mailing Address ↓ ↓ 102 S 3rd St, PO Box 136 City ↓ ↓ State ↓ ↓ Zip ↓ ↓ Laurens IA 50554 STATEMENT OF AFFIRMATION: By filling this document the committee understate the committee and all persons connected with the committee understate. | Candidate name & Address or Par Tom Shaw Mailing Address | State IA Com | Zip ↓ ↓ 50554 68B and the administrative |
| Year Standing for Election: 2010 Bank Account Name (must match committee name) ↓ ↓ Committee to Elect Tom Shaw Name of Financial Institution/type of Account ↓ ↓ Laurens State Bank Mailing Address ↓ ↓ 102 S 3rd St, PO Box 136 City ↓ ↓ State ↓ ↓ Zip ↓ ↓ Laurens IA 50554 STATEMENT OF AFFIRMATION: By filling this document the committee in Chapter 351 of the Iowa Administrative Code. 2. That Iowa Code section 68A 402 and rule 351—4.9 require the filing of subjects the candidate or chairperson (in the case of committees other tha | Candidate name & Address or Par Aff Tom Shaw Mailing Address 341 S 1st St City | State IA Com chapters 68A and e reports on or befissment of a civil p | Zip ↓ ↓ 50554 68B and the administrative ore the required due dates enalty and the possible |
| Year Standing for Election: 2010 Bank Account Name (must match committee name) ↓ ↓ Committee to Elect Tom Shaw Name of Financial Institution/type of Account ↓ ↓ Laurens State Bank Mailing Address ↓ ↓ 102 S 3rd St, PO Box 136 City ↓ ↓ State ↓ ↓ Zip ↓ ↓ Laurens IA 50554 STATEMENT OF AFFIRMATION: By filling this document the committee in Chapter 351 of the Iowa Administrative Code. 2. That Iowa Code section 68A.402 and rule 351—4.9 require the filling of subjects the candidate or chairperson (in the case of committees other tha imposition of other criminal and civil sanctions. 3. That Iowa Code section 68A.405 and rules 351—4.38 through 4.43 required and the subject of those items exempted by statute or rule. A committee materials except for those items exempted by statute or rule. A committee materials except for those items exempted by statute or rule. A committee materials except for those items exempted by statute or rule. | Candidate name & Address or Par Aff Tom Shaw Mailing Address | chapters 68A and e reports on or befissment of a civil posses of using the | Zip ↓ ↓ 50554 68B and the administrative ore the required due dates enalty and the possible ommittee on all political e shorter "paid for by" and |
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